



Region 2

**ACKNOWLEDGEMENT OF NOTIFICATION
OF
HAZARDOUS WASTE ACTIVITY**

07/23/2018

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER: NYR000026260

INSTALLATION NAME: LIBERTY COCA-COLA BEVERAGES LLC

INSTALLATION ADDRESS : 111 FAIRVIEW PARK DR
ELMSFORD, NY 10523

MAILING ADDRESS : 111 FAIRVIEW PARK DR
ELMSFORD, NY 10523

EPA Form 8700-12AB (4-80)


**USEPA - REGION 2
RCRA Programs Branch
290 Broadway, 22nd Floor
New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS
Tel : (212) 637-4106
Fax: (212) 637-4437**

**TO: LIBERTY COCA-COLA BEVERAGES LLC
or Current Occupant**

**ATTN: CHARLES WILKINSON
111 FAIRVIEW PARK DR
ELMSFORD, NY 10523**

updated

United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM	2018 JUL 10 APPROPRIATE BRANCH 
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1. Reason for Submittal (Select only one.)

<input checked="" type="checkbox"/>	Obtaining or updating an EPA ID number for an on-going regulated activity that will continue for a period of time. (Includes HSM activity)
<input type="checkbox"/>	Submitting as a component of the Hazardous Waste Report for _____ (Reporting Year)
<input type="checkbox"/>	Site was a TSD facility and/or generator of > 1,000 kg of hazardous waste, > 1 kg of acute hazardous waste, or > 100 kg of acute hazardous waste spill cleanup in one or more months of the reporting year (or State equivalent LQG regulations)
<input type="checkbox"/>	Notifying that regulated activity is no longer occurring at this Site
<input type="checkbox"/>	Obtaining or updating an EPA ID number for conducting Electronic Manifest Broker activities
<input type="checkbox"/>	Submitting a new or revised Part A Form

2. Site EPA ID Number

N	Y	R	0	0	0	0	2	6	2	6	0
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3. Site Name

LIBERTY COCA-COLA BEVERAGES LLC

4. Site Location Address

Street Address		111 FAIRVIEW PARK DRIVE	
City, Town, or Village		County	WESTCHESTER
State	NEW YORK	Country	USA
		Zip Code	10523

5. Site Mailing Address

☒ Same as Location Address

Street Address		
City, Town, or Village		
State	Country	Zip Code

6. Site Land Type

<input checked="" type="checkbox"/> Private	<input type="checkbox"/> County	<input type="checkbox"/> District	<input type="checkbox"/> Federal	<input type="checkbox"/> Tribal	<input type="checkbox"/> Municipal	<input type="checkbox"/> State	<input type="checkbox"/> Other
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7. North American Industry Classification System (NAICS) Code(s) for the Site (at least 5-digit codes)

A. (Primary)	49311	C.	484110
B.	312111	D.	484122

Entered 7-12-18 @

8. Site Contact Information

☒ Same as Location Address

First Name	CHARLES	MI	Last Name	WILKINSON
Title	MAINTENANCE MANAGER			
Street Address	111 FAIRVIEW PARK DRIVE			
City, Town, or Village	ELMSFORD			
State	NEW YORK	Country	USA	Zip Code 10523
Email	CWILKINSON@LIBERTYCOKE.COM			
Phone	(914) 789-1508	Ext	Fax	

9. Legal Owner and Operator of the Site

A. Name of Site's Legal Owner

☐ Same as Location Address

Full Name	LIBERTY COCA-COLA BEVERAGES LLC	Date Became Owner (mm/dd/yyyy)	10/28/2017
Owner Type	<input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
Street Address	725 EAST ERIE STREET		
City, Town, or Village	PHILADELPHIA		
State	PENNSYLVANIA	Country	USA
Zip Code	19134		
Email			
Phone	Ext	Fax	
Comments			

B. Name of Site's Legal Operator

☐ Same as Location Address

Full Name	LIBERTY COCA-COLA BEVERAGES LLC	Date Became Operator (mm/dd/yyyy)	10/28/2017
Operator Type	<input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
Street Address	111 FAIRVIEW PARK DRIVE		
City, Town, or Village	ELMSFORD		
State	NEW YORK	Country	USA
Zip Code	10523		
Email			
Phone	Ext	Fax	
Comments			

10. Type of Regulated Waste Activity (at your site)

Mark "Yes" or "No" for all current activities (as of the date submitting the form); complete any additional boxes as instructed.

A. Hazardous Waste Activities

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	1. Generator of Hazardous Waste —If "Yes", mark only one of the following—a, b, c	
<input type="checkbox"/>	a. LQG	-Generates, in any calendar month (includes quantities imported by importer site) 1,000 kg/mo (2,200 lb/mo) or more of non-acute hazardous waste; or - Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lb/mo) of acute hazardous waste; or - Generates, in any calendar month or accumulates at any time, more than 100 kg/mo (220 lb/mo) of acute hazardous spill cleanup material.
<input type="checkbox"/>	b. SQG	100 to 1,000 kg/mo (220-2,200 lb/mo) of non-acute hazardous waste and no more than 1 kg (2.2 lb) of acute hazardous waste and no more than 100 kg (220 lb) of any acute hazardous spill cleanup material.
<input checked="" type="checkbox"/>	c. VSQG	Less than or equal to 100 kg/mo (220 lb/mo) of non-acute hazardous waste.
If "Yes" above, indicate other generator activities in 2 and 3, as applicable.		
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	2. Short-Term Generator (generates from a short-term or one-time event and not from on-going processes). If "Yes", provide an explanation in the Comments section.	
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	3. Mixed Waste (hazardous and radioactive) Generator	
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	4. Treater, Storer or Disposer of Hazardous Waste —Note: A hazardous waste Part B permit is required for these activities.	
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	5. Receives Hazardous Waste from Off-site	
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	6. Recycler of Hazardous Waste	
<input type="checkbox"/>	a. Recycler who stores prior to recycling	
<input type="checkbox"/>	b. Recycler who does not store prior to recycling	
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	7. Exempt Boiler and/or Industrial Furnace —If "Yes", mark all that apply.	
<input type="checkbox"/>	a. Small Quantity On-site Burner Exemption	
<input type="checkbox"/>	b. Smelting, Melting, and Refining Furnace Exemption	

B. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g. D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	F003					
D002	F005					
D018						
D035						
F001						

C. Waste Codes for State Regulated (non-Federal) Hazardous Wastes. Please list the waste codes of the State hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.

11. Additional Regulated Waste Activities (NOTE: Refer to your State regulations to determine if a separate permit is required.)**A. Other Waste Activities**

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	1. Transporter of Hazardous Waste—If “Yes”, mark all that apply.
<input type="checkbox"/>	a. Transporter
<input type="checkbox"/>	b. Transfer Facility (at your site)
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	2. Underground Injection Control
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	3. United States Importer of Hazardous Waste
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	4. Recognized Trader—If “Yes”, mark all that apply.
<input type="checkbox"/>	a. Importer
<input type="checkbox"/>	b. Exporter
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	5. Importer/Exporter of Spent Lead-Acid Batteries (SLABs) under 40 CFR 266 Subpart G—If “Yes”, mark all that apply.
<input type="checkbox"/>	a. Importer
<input type="checkbox"/>	b. Exporter

B. Universal Waste Activities

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) - If “Yes” mark all that apply. Note: Refer to your State regulations to determine what is regulated.
<input type="checkbox"/>	a. Batteries
<input type="checkbox"/>	b. Pesticides
<input type="checkbox"/>	c. Mercury containing equipment
<input type="checkbox"/>	d. Lamps
<input type="checkbox"/>	e. Other (specify) _____
<input type="checkbox"/>	f. Other (specify) _____
<input type="checkbox"/>	g. Other (specify) _____
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	2. Destination Facility for Universal Waste Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	1. Used Oil Transporter—If “Yes”, mark all that apply.
<input type="checkbox"/>	a. Transporter
<input type="checkbox"/>	b. Transfer Facility (at your site)
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	2. Used Oil Processor and/or Re-refiner—If “Yes”, mark all that apply.
<input type="checkbox"/>	a. Processor
<input type="checkbox"/>	b. Re-refiner
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	3. Off-Specification Used Oil Burner
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	4. Used Oil Fuel Marketer—If “Yes”, mark all that apply.
<input type="checkbox"/>	a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
<input type="checkbox"/>	b. Marketer Who First Claims the Used Oil Meets the Specifications

12. Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR 262 Subpart K.

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Opting into or currently operating under 40 CFR 262 Subpart K for the management of hazardous wastes in laboratories—If “Yes”, mark all that apply. Note: See the item-by-item instructions for definitions of types of eligible academic entities.
<input type="checkbox"/>	1. College or University
<input type="checkbox"/>	2. Teaching Hospital that is owned by or has a formal written affiliation with a college or university
<input type="checkbox"/>	3. Non-profit Institute that is owned by or has a formal written affiliation with a college or university
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	B. Withdrawing from 40 CFR 262 Subpart K for the management of hazardous wastes in laboratories.

13. Episodic Generation

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Are you an SQG or VSQG generating hazardous waste from a planned or unplanned episodic event, lasting no more than 60 days, that moves you to a higher generator category. If “Yes”, you must fill out the Addendum for Episodic Generator.
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14. LQG Consolidation of VSQG Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Are you an LQG notifying of consolidating VSQG Hazardous Waste Under the Control of the Same Person pursuant to 40 CFR 262.17(f)? If “Yes”, you must fill out the Addendum for LQG Consolidation of VSQGs hazardous waste.
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15. Notification of LQG Site Closure for a Central Accumulation Area (CAA) (optional) OR Entire Facility (required)

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	LQG Site Closure of a Central Accumulation Area (CAA) or Entire Facility.
A. <input type="checkbox"/> Central Accumulation Area (CAA) <input type="checkbox"/> Entire Facility	
B. Expected closure date: _____ mm/dd/yyyy	
C. Requesting new closure date: _____ mm/dd/yyyy	
D. Date closed : _____ mm/dd/yyyy	
<input type="checkbox"/>	1. In compliance with the closure performance standards 40 CFR 262.17(a)(8)
<input type="checkbox"/>	2. Not in compliance with the closure performance standards 40 CFR 262.17(a)(8)

16. Notification of Hazardous Secondary Material (HSM) Activity

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 260.30, 40 CFR 261.4(a)(23), (24), or (27)? If “Yes”, you must fill out the Addendum to the Site Identification Form for Managing Hazardous Secondary Material.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	B. Are you notifying under 40 CFR 260.43(a)(4)(iii) that the product of your recycling process has levels of hazardous constituents that are not comparable to or unable to be compared to a legitimate product or intermediate but that the recycling is still legitimate? If “Yes”, you may provide explanation in Comments section. You must also document that your recycling is still legitimate and maintain that documentation on site.

17. Electronic Manifest Broker

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Are you notifying as a person, as defined in 40 CFR 260.10, electing to use the EPA electronic manifest system to obtain, complete, and transmit an electronic manifest under a contractual relationship with a hazardous waste generator?
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18. Comments (include item number for each comment)

[illegible]

19. Certification I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations. **Note: For the RCRA Hazardous Waste Part A permit Application, all owners and operators must sign (see 40 CFR 270.10(b) and 270.11).**

Signature of legal owner, operator or authorized representative <i>T. Sharp</i>	Date (mm/dd/yyyy) <i>6/25/2018</i>
Printed Name (First, Middle Initial Last) Terry Sharp	Title Plant Manager
Email tsharp@libertycoke.com	

Signature of legal owner, operator or authorized representative	Date (mm/dd/yyyy)
Printed Name (First, Middle Initial Last)	Title
Email	



2018 JUL 10 A 4: 06

REGION 2
BRANCH

June 25, 2018

US Environmental Protection Agency
Region 2
Hazardous Waste Program
290 Broadway
25th Floor
New York, New York 10007-1866

RE: RCRA Subtitle C Site Identification Form
Liberty Coca-Cola Beverages
Elmsford, New York 10523
NYR000026260

To whom it may concern:

Attached, please find a completed RCRA Subtitle C Site Identification Form (EPA Form 8700) for the Liberty Coca-Cola Beverages LLC (Liberty) facility located at 111 Fairview Park Drive, Elmsford, New York. The facility was previously owned by Coca-Cola Refreshments USA, Inc. The purpose of this submittal is to transfer the current EPA ID Number (NYR000026260) to Liberty. Please note, the operations at the property and facility remain the same (same NAICS/SIC codes), as does the equipment and personnel.

Please contact me by phone at (914) 308-0111 or email at dmauro@libertycoke.com, if you have any questions regarding this form or require additional information.

Sincerely,

A handwritten signature in blue ink that reads "Douglas P. Mauro".

Douglas P. Mauro
SES Manager

Attachment

cc: J. Tuttle, LCCB



**ACKNOWLEDGEMENT OF NOTIFICATION
OF
HAZARDOUS WASTE ACTIVITY**

09/08/2011

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER: NYR000026260

INSTALLATION NAME: COCA-COLA REFRESHMENTS USA INC LA

INSTALLATION ADDRESS : 111 FAIRVIEW PARK DR
ELMSFORD, NY 10523

MAILING ADDRESS : 111 FAIRVIEW PARK DR
ELMSFORD, NY 10523

EPA Form 8700-12AB (4-80)

USEPA - REGION 2
RCRA Programs Branch
290 Broadway, 22nd Floor
New York, NY 10007-1866

ATTN: RCRA NOTIFICATIONS
Tel : (212) 637-4106
Fax: (212) 637-4437

TO: COCA-COLA REFRESHMENTS USA INC LA
or Current Occupant
ATTN: GODFREY STEWART
111 FAIRVIEW PARK DR
ELMSFORD, NY 10523

2011 AUG 15 PM 12:19

RCRA PROGRAMS
BRANCH

SEND
COMPLETED
FORM TO:
The Appropriate
State or Regional
Office.

United States Environmental Protection Agency
RCRA SUBTITLE C SITE IDENTIFICATION FORM

1. Reason for Submittal

MARK ALL
BOX(ES) THAT
APPLY

Reason for Submittal:

- ☐ To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location)
- ☒ To provide a Subsequent Notification (to update site identification information for this location)
- ☐ As a component of a First RCRA Hazardous Waste Part A Permit Application
- ☐ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)
- ☐ As a component of the Hazardous Waste Report (If marked, see sub-bullet below)
- ☐ Site was a TSD facility and/or generator of $\geq 1,000$ kg of hazardous waste, >1 kg of acute hazardous waste, or >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)

2. Site EPA ID Number

EPA ID Number NYR 00026260 (R)

3. Site Name

Name: Coca-Cola Refreshments USA, Inc. LA

4. Site Location Information

Street Address: 111 Fairview Park Drive

City, Town, or Village: Elmsford

County: Westchester

State: New York

Country: USA

Zip Code: 10523

5. Site Land Type

☒ Private ☐ County ☐ District ☐ Federal ☐ Tribal ☐ Municipal ☐ State ☐ Other

6. NAICS Code(s) for the Site (at least 5-digit codes)

A. 312111C. 493110B. 484122D.

7. Site Mailing Address

Street or P.O. Box: 111 Fairview Park Drive

City, Town, or Village: Elmsford

State: New York

Country: USA

Zip Code: 10523

8. Site Contact Person

First Name: GODFREY

MI:

Last: STEWART

Title: OPERATIONS MANAGER

Street or P.O. Box: 111 FAIRVIEW PARK DRIVE

City, Town or Village: ELMSFORD

State: NY

Country: WESTCHESTER

Zip Code: 10523

Email: gostewart@coca-cola.com

Phone: (914) 789-1246

Ext.:

Fax: (914) 789-1524

9. Legal Owner and Operator of the Site

A. Name of Site's Legal Owner: Coca-Cola Refreshments USA, Inc.

Date Became Owner: October 2, 2010

Owner Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Tribal ☐ Municipal ☐ State ☐ Other

Street or P.O. Box: 1 Coca-Cola Plaza

City, Town, or Village: Atlanta

Phone: 770-989-3000

State: Georgia

Country: USA

Zip Code: 30313

B. Name of Site's Operator: DAVID S. PRESTIPINO

Date Became Operator: October 2, 2010

Operator Type:

☒ Private ☐ County ☐ District ☐ Federal ☐ Tribal ☐ Municipal ☐ State ☐ Other

Rec-8/16/11 - Called 8/16/11 - spoke to Mr Stewart who is requesting name change on site address listed above, he provided address and EPA ID on application. (R)

10. Type of Regulated Waste Activity (at your site)Mark "Yes" or "No" for all current activities (as of the date submitting the form); complete any additional boxes as instructed.**A. Hazardous Waste Activities; Complete all parts 1-7.**Y ☒ N ☐**1. Generator of Hazardous Waste**

If "Yes", mark only one of the following – a, b, or c.

- ☐ a. LQG: Generates, in any calendar month, 1,000 kg/mo (2,200 lbs./mo.) or more of hazardous waste; **or** Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs./mo) of acute hazardous waste; **or** Generates, in any calendar month, **or** accumulates at any time, more than 100 kg/mo (220 lbs./mo) of acute hazardous spill cleanup material.
- ☒ b. SQG: 100 to 1,000 kg/mo (220 – 2,200 lbs./mo) of non-acute hazardous waste.
- ☐ c. CESQG: Less than 100 kg/mo (220 lbs./mo) of non-acute hazardous waste.

If "Yes" above, indicate other generator activities.

Y ☐ N ☒

d. Short-Term Generator (generate from a short-term or one-time event and not from on-going processes). If "Yes", provide an explanation in the Comments section.

Y ☐ N ☒

e. United States Importer of Hazardous Waste

Y ☐ N ☒

f. Mixed Waste (hazardous and radioactive) Generator

Y ☐ N ☒**2. Transporter of Hazardous Waste**

If "Yes", mark all that apply.

- ☐ a. Transporter
- ☐ b. Transfer Facility (at your site)

Y ☐ N ☒**3. Treater, Storer, or Disposer of Hazardous Waste** Note: A hazardous waste permit is required for these activities.Y ☐ N ☒**4. Recycler of Hazardous Waste**Y ☐ N ☒**5. Exempt Boiler and/or Industrial Furnace** If "Yes", mark all that apply.

- ☐ a. Small Quantity On-site Burner Exemption
- ☐ b. Smelting, Melting, and Refining Furnace Exemption

Y ☐ N ☒**6. Underground Injection Control**Y ☐ N ☒**7. Receives Hazardous Waste from Off-site****B. Universal Waste Activities; Complete all parts 1-2.**Y ☐ N ☒**1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes", mark all that apply.**

- a. Batteries ☐
- b. Pesticides ☐
- c. Mercury containing equipment ☐
- d. Lamps ☐
- e. Other (specify) _____ ☐
- f. Other (specify) _____ ☐
- g. Other (specify) _____ ☐

Y ☐ N ☒**2. Destination Facility for Universal Waste**

Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities; Complete all parts 1-4.Y ☐ N ☒**1. Used Oil Transporter**

If "Yes", mark all that apply.

- ☐ a. Transporter
- ☐ b. Transfer Facility (at your site)

Y ☐ N ☒**2. Used Oil Processor and/or Re-refiner** If "Yes", mark all that apply.

- ☐ a. Processor
- ☐ b. Re-refiner

Y ☐ N ☒**3. Off-Specification Used Oil Burner**Y ☐ N ☒**4. Used Oil Fuel Marketer**

If "Yes", mark all that apply.

- ☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
- ☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

D. Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K

- ❖ You must check with your State to determine if you are eligible to manage laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K

- ☐ 1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories
See the item-by-item instructions for definitions of types of eligible academic entities. Mark all that apply:

- ☐ a. College or University
☐ b. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university
☐ c. Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university

- ☐ 2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories

11. Description of Hazardous Waste

- A. Waste Codes for Federally Regulated Hazardous Wastes.** Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	D002	D018	D035	F003	F005	

- B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes.** Please list the waste codes of the State-Regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.

12. Notification of Hazardous Secondary Material (HSM) Activity

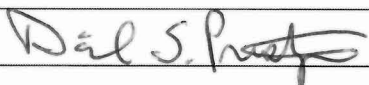
Y ☐ N ☒ Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 261.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25)?

If "Yes", you must fill out the Addendum to the Site Identification Form: Notification for Managing Hazardous Secondary Material.

13. Comments

Our facility recently went through a corporate acquisition and reorganization. We are still part of the Coca-Cola business system, but we are now owned and operated by a different Coca-Cola entity. Previously, we were owned and operated by Coca-Cola Enterprises, Inc., an independent bottling company. Now, we are owned and operated by Coca-Cola Refreshments USA, Inc., a wholly-owned subsidiary of The Coca-Cola Company.

14. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all owner(s) and operator(s) must sign (see 40 CFR 270.10(b) and 270.11).

Signature of legal owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	DAVID S. PRESTIPINO PLANT MANAGER	08/11/2011



August 11, 2011

ENVIRONMENTAL PROTECTION
AGENCY, REGION II
2011 AUG 15 PM 12:19
RCRA PROGRAMS
BRANCH

VIA OVERNIGHT MAIL

USEPA Region 2
DEPP – RCRA Programs Branch
Attn: RCRA Notifications
290 Broadway, 22nd Floor
New York, New York 10007-1866

Re: Hazardous Waste Permit/Registration ID NYD038649331
Facility Ownership Change

Our facility recently went through a corporate acquisition and reorganization. We are still part of the Coca-Cola business system, and we continue to be owned and operated by Coca-Cola Enterprises Inc. under its new name, Coca-Cola Refreshments USA, Inc., which is now a wholly-owned subsidiary of The Coca-Cola Company. We therefore want to notify you of this change and submit the attached documentation for a permit name change, per applicable legal requirements.

Please let us know if you have any questions or require anything further.

Sincerely,

Coca-Cola Refreshments USA, Inc.

A handwritten signature in black ink, appearing to read "David S. Prestipino".

David S. Prestipino

Cc: Joseph Richardson, Region Environmental Manager

Attachment: RCRA EPA 8700-12 form

RCRA Site Detail

Report run on: August 16, 2011 - 11:18 AM

Page 3

COCA-COLA BOTTLING CO OF NEW YORK

NYR000026260

EPA Region:02 Extract: Y County: WESTCHESTER

State District: NYSDEC R3

Universes	Federal Generator: SQG	Transporter: N	Operating TSDF: ----	Active: Y
	State Generator: 9	Importer: N	Commercial: N	El Indicator (HE / GW): N / N
	Short Term Generator: N	Mixed Waste Generator: N	HSM: N	IC In Place: N
	Subpart K/College: N	Subpart K/Hospital: N	Subpart K/Non-profit: N	Subpart K/Withdrawal: N

Latitude/Longitude Measure -	Owner: 02	Seq #: 1
Geometric Type Code:	001	Horizontal Collection Method: 001
Horizontal Accuracy Measure:	10	Horizontal Reference Datum: 002
Coordinates:	41.067486, -73.816594	
		Reference Point Code:
		Source Map Scale Numbers:

Receive Date: 11/18/2009 Source Type: Notification Seq. Number: 2

Location 111 FAIRVIEW PARK DR
Address: ELMSFORD, NY 10523

Mailing 111 FAIRVIEW PARK DR
Address: ELMSFORD, NY 10523
UNITED STATES

Contact Person	JOSEPH W. RICHARDSON	111 FAIRVIEW PARK DR
For Source	(410) 684-7274	ELMSFORD, NY 10523
Information	JORICHARDSON@COKECCE.COM	UNITED STATES

Owner (current)	2500 WINDY RIDGE PKWY	Type: Private
COCA-COLA ENTERPRISES	ATLANTA, GA 30339	Phone:
From: 06/01/2001 To:	ATLANTA	

Operator (current)	Type: Private
COCA-COLA ENTERPRISES	Phone:
From: 06/01/2001 To:	

Land Type: Private	Non Notifier: No	TSD Date:	Accessibility:
--------------------	------------------	-----------	----------------

NAICS Codes: 312111 SOFT DRINK MANUFACTURING

Notes: LOCATION ADDRESS FOUND IN THE US POST OFFICE INTERNET SEARCH

Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Small Quantity Generator; State: NY-9 This option is not active

Other Hazardous Waste Generator Activities

Used Oil Activities

Short Term Generator:	No	Used Oil Transporter Activity	Off-Specification Used Oil Burner:	No
Importer Activity:	No	Transporter:	No	Used Oil Fuel Marketer Activity
Mixed Waste Generator:	No	Transfer Facility:	No	Marketer who directs shipment off-specification used oil to off-specification used oil burner:
Transporter Activity:	No	Used Oil Processor and/or Re-refiner Activity		No
Transfer Facility:		Processor:	No	Marketer who first claims the used oil meets the specifications:
TSD Activity:	No	Refiner:	No	No
Recycler Activity:	No			
Exempt Boiler and/or Industrial Furnace		Subpart K		
Small Quantity Onsite Burner Exemption:	No	College/University:	No	Non-profit Research Institute:
Smelting, Melting, Refining Furnace Exemption:	No	Teaching Hospital:	No	Withdrawal:
				No
Underground Injection Control:	No			
Destination Facility for Universal Waste:	No			

Description of Hazardous Wastes (as reported on Site Identification Form)

EPA Waste Codes: D001 D018 D035 F001 F003 F005

RCRA Site Detail

Report run on: August 16, 2011 - 11:18 AM

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Receive Date: 01/01/2007	Source Type: Implementer	Seq. Number: 2
--------------------------	--------------------------	----------------

Other/Previous Site Name: COCA COLA BOTTLING CO OF NY

Location 111 FAIRVIEW PARK DR Address: ELMSFORD, NY 10523	Mailing 111 FAIRVIEW PARK DR Address: ELMSFORD, NY 10523 UNITED STATES
--	--

Contact Person ROBERT BRADY 111 FAIRVIEW PARK DR
 For Source (201) 447-9000 ELMSFORD, NY 10523
 Information UNITED STATES

Owner (current) 947 LINWOOD AVE Type: Private
 RIDGEWOOD ELMSFORD POWER PARTNER LP RIDGEWOOD, NJ 07450
 From: To: RIDGEWOOD Phone: (201) 447-9000

Notes: This record created to coincide with EPA Mass Update for 01/01/2007 on Rundate: 06/11/2008

Operator (current) 947 LINWOOD AVE Type: Private
 RIDGEWOOD ELMSFORD POWER PARTNER LP RIDGEWOOD, NJ 07450
 From: To: RIDGEWOOD Phone: (201) 447-9000

Notes: This CP Indicator record created to coincide with EPA Mass Update for 01/01/2007 on Rundate: 06/11/2008...and HQ Criteria forcing at least one Current Operator to exist None existed to this update

Land Type: Private Non Notifier: No TSD Date: Accessibility:

Notes: 22-APR-10 Verified Nulling of "Transferred to CERCLA Status": EPA Universe Clean-Up for 01/01/2006, (Rundate: 05/08/2007), as per 2003/2004/2005 Acute/NonAcute Manifest data. Old Univ= CQG New Univ= N Update 10/03 to ensure Leg_Dist is associated with correct Counties

Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Not a Generator; State: NY-X Replaces a Null value not allowed to reload via CDX.

Other Hazardous Waste Generator Activities

Short Term Generator:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility:	
TSD Activity:	No
Recycler Activity:	No

Exempt Boiler and/or Industrial Furnace

Small Quantity Onsite Burner Exemption:	No
Smelting, Melting, Refining Furnace Exemption:	No

Underground Injection Control:	No
Destination Facility for Universal Waste:	No

Used Oil Activities

Used Oil Transporter Activity	Off-Specification Used Oil Burner:	No
Transporter:	Used Oil Fuel Marketer Activity	
Transfer Facility:	Marketer who directs shipment off-specification used oil to off-specification used oil burner:	No
Used Oil Processor and/or Re-refiner Activity	Marketer who first claims the used oil meets the specifications:	No
Processor:		
Refiner:		

Subpart K

College/University:	No	Non-profit Research Institute:	No
Teaching Hospital:	No	Withdrawal:	No

RCRA Site Detail

Report run on: August 16, 2011 - 11:18 AM

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Receive Date: 01/01/2006	Source Type: Implementer	Seq. Number: 1
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Other/Previous Site Name: COCA COLA BOTTLING CO OF NY

Location 111 FAIRVIEW PARK DR Address: ELMSFORD, NY 10523	Mailing Address: 111 FAIRVIEW PARK DR ELMSFORD, NY 10523 UNITED STATES
--	---

Contact Person ROBERT BRADY 111 FAIRVIEW PARK DR
 For Source (201) 447-9000 ELMSFORD, NY 10523
 Information UNITED STATES

Land Type: Private Non Notifier: No TSD Date: Accessibility:

Notes: 22-APR-10 Verified Nulling of "Transferred to CERCLA Status": EPA Universe Clean-Up for 01/01/2006, (Rundate: 05/08/2007), as per 2003/2004/2005 Acute/NonAcute Manifest data. Old Univ= CQG New Univ= N Update 10/03 to ensure Leg_Dist is associated with correct Counties

Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Not a Generator; State: NY-X Replaces a Null value not allowed to reload via CDX.

Other Hazardous Waste Generator Activities

Short Term Generator:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility:	No
TSD Activity:	No
Recycler Activity:	No
Exempt Boiler and/or Industrial Furnace	
Small Quantity Onsite Burner Exemption:	No
Smelting, Melting, Refining Furnace Exemption:	No

Underground Injection Control:	No
Destination Facility for Universal Waste:	No

Used Oil Activities

Used Oil Transporter Activity		Off-Specification Used Oil Burner:	No
Transporter:	No	Used Oil Fuel Marketer Activity	
Transfer Facility:	No	Marketer who directs shipment off-specification used oil to off-specification used oil burner:	No
Used Oil Processor and/or Re-refiner Activity		Marketer who first claims the used oil meets the specifications:	No
Processor:	No		
Refiner:	No		

Subpart K

College/University:	No	Non-profit Research Institute:	No
Teaching Hospital:	No	Withdrawal:	No

RCRA Site Detail

Report run on: August 16, 2011 - 11:18 AM

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Receive Date: 07/05/1996	Source Type: Notification	Seq. Number: 1
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Other/Previous Site Name: COCA COLA BOTTLING CO OF NY

Location 111 FAIRVIEW PARK DR Address: ELMSFORD, NY 10523	Mailing 111 FAIRVIEW PARK DR Address: ELMSFORD, NY 10523
--	---

Contact Person ROBERT BRADY 947 LINWOOD AVE
For Source (201) 447-9000 RIDGEWOOD, NJ 07450
Information UNITED STATES

Owner (current) RIDGEWOOD ELMSFORD POWER PARTNER LP 947 LINWOOD AVE
 From: To: RIDGEWOOD, NJ 07450
 Type: Private
 Phone: (201) 447-9000

Land Type: Private	Non Notifier: No	TSD Date:	Accessibility:
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Notes: Update 10/03 to ensure Leg_Dist is associated with correct Counties

Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Conditionally Exempt SQG; State:

Other Hazardous Waste Generator Activities

Short Term Generator:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility:	No
TSD Activity:	No
Recycler Activity:	No

Exempt Boiler and/or Industrial Furnace

Small Quantity Onsite Burner Exemption:	No
Smelting, Melting, Refining Furnace Exemption:	No

Underground Injection Control:	No
Destination Facility for Universal Waste:	No

Used Oil Activities

Used Oil Transporter Activity	Off-Specification Used Oil Burner:	No
Transporter:	Used Oil Fuel Marketer Activity	
Transfer Facility:	Marketer who directs shipment off-specification used oil to off-specification used oil burner:	No
Used Oil Processor and/or Re-refiner Activity	Marketer who first claims the used oil meets the specifications:	No
Processor:		
Refiner:		

Subpart K

College/University:	No	Non-profit Research Institute:	No
Teaching Hospital:	No	Withdrawal:	No

Description of Hazardous Wastes (as reported on Site Identification Form)

EPA Waste Codes: X001

* End of Report *



Region 2

**ACKNOWLEDGEMENT OF NOTIFICATION
OF
HAZARDOUS WASTE ACTIVITY**

12/01/2009

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER:	NYR000026260
INSTALLATION NAME:	COCA-COLA BOTTLING CO OF NEW YORK
INSTALLATION ADDRESS :	111 FAIRVIEW PARK DR ELMSFORD, NY 10523
MAILING ADDRESS :	111 FAIRVIEW PARK DR ELMSFORD, NY 10523

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2
RCRA Programs Branch
290 Broadway, 22nd Floor
New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS
Tel : (212) 637-4106
Fax: (212) 637-4437**

**TO: COCA-COLA BOTTLING CO OF NEW YORK
or Current Occupant
ATTN: JOSEPH RICHARDSON
111 FAIRVIEW PARK DR
ELMSFORD, NY, 10523**

SEND COMPLETED FORM TO:
The Appropriate State or EPA Regional Office.

United States Environmental Protection Agency

**RCRA SUBTITLE C SITE IDENTIFICATION FORM**

11-18-09

1. Reason for Submittal
(See instructions on page 13.)

MARK ALL BOX(ES) THAT APPLY

Reason for Submittal:

- ☐ To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)
- ☒ To provide Subsequent Notification of Regulated Waste Activity (to update site identification information)
- ☐ As a component of a First RCRA Hazardous Waste Part A Permit Application
- ☐ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)
- ☐ As a component of the Hazardous Waste Report

2. Site EPA ID Number
(page 14)

EPA ID Number

N Y R 0 0 0 0 2 6 2 6 0

3. Site Name
(page 14)

Name:

COCA-COLA BOTTLING COMPANY OF NEW YORK

4. Site Location Information
(page 14)

Street Address: 111 FAIRVIEW PARK DRIVE

City, Town, or Village: ELMSFORD

State: NY

County Name: WESTCHESTER

Zip Code: 10523

5. Site Land Type
(page 14)

Site Land Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other

6. North American Industry Classification System (NAICS) Code(s) for the Site
(page 14)

A.

3 1 2 1 1 1

B.

1 1 1 1 1 1

C.

1 1 1 1 1 1

D.

1 1 1 1 1 1

7. Site Mailing Address
(page 15)

Street or P. O. Box: SAME AS ABOVE (SEE ITEM #4)

City, Town, or Village:

State:

Country:

Zip Code:

8. Site Contact Person
(page 15)

First Name: JOSEPH

MI:

W.

Last Name: RICHARDSON

Phone Number: 410-684-7274

Extension:

Email address: JORICHARDSON@COKECCO.COM

9. Operator and Legal Owner of the Site
(pages 15 and 16)

A. Name of Site's Operator:

COCA-COLA ENTERPRISES

Date Became Operator (mm/dd/yyyy):

06/01/2001

Operator Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other

B. Name of Site's Legal Owner:

COCA-COLA ENTERPRISES

Date Became Owner (mm/dd/yyyy):

06/01/2001

Owner Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other

EPA ID NO: N Y R 0 0 0 0 2 6 2 6 0

OMB#: 2050-0028 Expires 06/30/2009

9. Legal Owner (Continued) Address	Street or P. O. Box: <u>2500 WINDY RIDGE PARKWAY</u>	
	City, Town, or Village: <u>ATLANTA</u>	
	State: <u>GA</u>	
	Country: <u>USA</u>	Zip Code: <u>30339</u>

10. Type of Regulated Waste Activity

Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 17 to 20.)

A. Hazardous Waste Activities

Complete all parts for 1 through 6.

☒ ☐ 1. Generator of Hazardous Waste

If "Yes", choose only one of the following - a, b, or c.

☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.)
of non-acute hazardous waste; or☒ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.)
of non-acute hazardous waste; or☐ c. CESQG: Less than 100 kg/mo (220 lbs./mo.)
of non-acute hazardous waste

In addition, indicate other generator activities.

☐ ☒ d. United States Importer of Hazardous Waste☐ ☒ e. Mixed Waste (hazardous and radioactive) Generator☐ ☒ 2. Transporter of Hazardous Waste☐ ☒ 3. Treater, Storer, or Disposer of
Hazardous Waste (at your site) Note: A
hazardous waste permit is required for this
activity.☐ ☒ 4. Recycler of Hazardous Waste (at your
site)☐ ☒ 5. Exempt Boiler and/or Industrial Furnace
If "Yes", mark each that applies.☐ a. Small Quantity On-site Burner
Exemption☐ b. Smelting, Melting, and Refining☐ ☒ 6. Underground Injection Control

B. Universal Waste Activities

☐ ☒ 1. Large Quantity Handler of Universal Waste (accumulate
5,000 kg or more) [refer to your State regulations to
determine what is regulated]. Indicate types of universal
mark all boxes that apply:Managea. Batteries ☐b. Pesticides ☐c. Mercury containing equipment ☐d. Lamps ☐e. Other (specify) _____ ☐f. Other (specify) _____ ☐g. Other (specify) _____ ☐☐ ☒ 2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities

Mark all boxes that apply.

☐ ☒ 1. Used Oil Transporter
If "Yes", mark each that applies.☐ a. Transporter☐ b. Transfer Facility☐ ☒ 2. Used Oil Processor and/or Re-refiner
If "Yes", mark each that applies.☐ a. Processor☐ b. Re-refiner☐ ☒ 3. Off-Specification Used Oil Burner☐ ☒ 4. Used Oil Fuel Marketer

If "Yes", mark each that applies.

☐ a. Marketer Who Directs Shipment of
Off-Specification Used Oil to
Off-Specification Used Oil Burner☐ b. Marketer Who First Claims the
Used Oil Meets the Specifications

EPA ID NO: NYR 000 026 260

OMB#: 2050-0028 Expires 06/30/2009

11. Description of Hazardous Wastes (See instructions on page 21.)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	F001					
D018	F003					
D035	F005					

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

12. Comments (See instructions on page 21.)

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

For the RCRA Hazardous Waste Part A Permit Application, all operator(s) and owner(s) must sign (see 40 CFR 270.10 (b) and 270.11). (See instructions on page 21.)

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
<i>Joseph W. Richardson</i>	JOSEPH RICHARDSON, Environmental Manager	11/16/2009



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

07/15/96

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NYR000026260

FACILITY NAME -> COCA COLA BOTTLING CO OF NY

MAILING ADDRESS -> 111 FAIRVIEW PARK DR
ELMSFORD, NY 10523

INSTALLATION ADDRESS -> 111 FAIRVIEW PARK DR
ELMSFORD, NY 10523

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
290 BROADWAY
NEW YORK, NEW YORK 10007-1866

ATTN: AIR & WASTE MANAGEMENT DIVISION, 22ND FL.
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: BRADY, ROBERT
SR VICE PRES
COCA COLA BOTTLING CO OF NY
947 LINWOOD AVE
RIDGEWOOD, NJ 07450

Please print or type with ELITE

To avoid delays in processing, please complete all sections.
Only original signature of the Generator is acceptable.

33

Please refer to the instructions for filling Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

EPA

Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

JUL -5 AM 10:33

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☐

A. First Notification

☒

B. Subsequent Notification
(Complete item C)

C. Installation's EPA ID Number

NY 986889863

II. Name of Installation (Include company and specific site name)

COCA-COLA BOTTLING CO. OF NY

III. Location of Installation Requires Building Number or Latitude and Longitude for processing.

Street 11

11 FAIRVIEW PARK DRIVE

Street (Continued)

City of Town State Zip Code

ELMSFORD NY 10523

COUNTY CODE County Name

119 WESTCHESTER

IV. Installation Mailing Address

Street or P.O. Box 111

11 FAIRVIEW PARK DRIVE

City or Town State Zip Code

ELMSFORD NY 10523

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last) (First)

BRADY ROBERT

Job Title Phone Number (Area Code and Number)

SR VP 201-447-9000

VI. Installation Contact Address

A. Contract Address Location Mailing Other B. Street or P.O. Box

947 LINWOOD AVENUE

City or Town State Zip Code

RIDGEWOOD NJ 07450

VII. Ownership

A. Name of Installation's Legal Owner

RIDGEWOOD/ELMSFORD POWER PARTNER

Street, P.O. Box, or Route Number

947 LINWOOD AVENUE

City or Town State Zip Code

RIDGEWOOD NJ 07450

Phone Number (Area Code and Number) B. Land Type C. Owner Type D. Change of Owner Indicator (Date Changed) Month Day Year

201-447-9000 P P Yes X No 093095

From: Jack Hoyt, AWMD, EPA, Region 2, 290 Broadway, 22 Fl.
New York, NY 10007-1866. Tel: (212) 637 4106

Feed Ex
epk to Suzanne
7/8/94 BD

Call

NYR 000026260

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to instructions)

A. Hazardous Waste Activity

1. Generator (See instructions)

- ☐ a. Greater than 1000kg/mo (2,200 lbs.)
☐ b. 100 to 1000 kg/mo (200-2,200 lbs.)
☒ c. Less than 100 kg/mo (220 lbs.)

2. Transporter (Indicate Mode in boxes 1-5 below)

- ☐ a. For own waste only
☐ b. For commercial purposes

Mode of Transportation

- ☐ 1. Air
☐ 2. Rail
☐ 3. Highway
☐ 4. Water
☐ 5. Other - specify

3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions.

4. Hazardous Waste Fuel

- ☐ a. Generator Marketing to Burner
☐ b. Other Marketers
☐ c. Boiler and/or Industrial Furnace

- ☐ 1. Smelter Deferral
☐ 2. Small Quantity Exemption
 Indicate Type of Combustion Device(s)

- ☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace

5. Underground Injection Control

B. Used Oil Recycling Activities

1. Used Oil Fuel Marketer

- ☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)

- ☐ a. Utility Boiler
☐ b. Industrial Boiler
☐ c. Industrial Furnace

3. Used Oil Transporter - Indicate Type(s) of Activity(ies)

- ☐ a. Transporter
☐ b. Transfer Facility

4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)

- ☐ a. Process
☐ b. Re-refine

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001)

☐

2. Corrosive (D002)

☐

3. Reactive (D003)

☐

4. Toxicity Characteristic

☐

(List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))

☒ 7 ☒ 6 ☒ 0 ☒ 1

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1
7

2
8

3
9

4
10

5
11

6
12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number, See instructions.)

1

2

3

4

5

6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature ORIGINAL ONLY

[Signature]

Name and Official Title (Type or print)

SEVP & CFO, Ridgewood/Elmsford Power Corp, GP

Date Signed

7/2/96

XI. Comments

The Cogeneration facility only generates used motor oil.

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

Please print or type with ELITE

To avoid delays in processing, please complete all sections.
Only original signature of the Generator is acceptable.

33

Please print or type with ELITE

Pat Wilson
Ridgewood Power Corp
947 Linwood Ave
Ridgewood, NJ 07450
(201) - 447-9000

Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
96 JUL -5 AM 10:33
PROGRAMS BRANCH
Hazardous Waste

I. Install

☐

the appropriate box)

Subsequent Notification
(complete item C)

C. Installation's EPA ID Number

NJ D9868898163

II. Name of Installation (Include company and specific site name)

Coca-Cola Bottling Co. of NJ

III. Location of Installation Requires Building Number or Latitude and Longitude for processing.

Street

Fairview Park Drive

Street (Continued)

CO

City of Town

ELMS FORD

State

Zip Code

NJ

10523

COUNTY

County Name

119

WESTCHESTER

IV. Installation Mailing Address

Street or P.O. Box

Fairview Park Drive

City or Town

ELMS FORD

State

Zip Code

NJ

10523

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

BRADY

(First)

ROBERT

Job Title

SR

VP

Phone Number (Area Code and Number)

201-447-9000

VI. Installation Contact Address

A. Contract Address
Location Mailing Other

☐

☒

☐

B. Street or P.O. Box

947 LINWOOD AVENUE

City or Town

RIDGEWOOD

State

Zip Code

NJ

07450

VII. Ownership

A. Name of Installation's Legal Owner

RIDGEWOOD / ELMS FORD POWER PARTNER LP

Street, P.O. Box, or Route Number

947 LINWOOD AVENUE

City or Town

RIDGEWOOD

State

Zip Code

NJ

07450

Phone Number (Area Code and Number)

201-447-9000

B. Land Type

P

C. Owner Type

P

D. Change of Owner Indicator

Yes

☒

No

(Date Changed)
Month Day Year

093095

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